

amendment attached

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 114

Registered No. 20

PLACE OF BIRTH

County

Gila

State

Arizona

District or Township

City

Miami

No. 3118

or Village

Turkey Shoot Canon

Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

2. Full name of child

Ventura Hernandez

3. Sex of Child

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other

5. Legitimate?

7. Date

of birth

Month Day Year

Jan-10-1928

Female

5. No., in order of birth

yes

8.

FATHER

Full name

Ramon Hernandez

9. Residence

(Usual place of abode)

Miami

If non-resident, give place and state.

Arizona

10. Color or race

Mex.

11. Age at last birthday 38 (Years)

12. Birthplace (city or place)

(State or country)

Jalisco

Mex.

13. Occupation

Nature of industry

Miner

14.

MOTHER

Full maiden name

Maria Casillas

15. Residence

(Usual place of abode)

Miami

If non-resident, give place and state.

Arizona

16. Color or race

Mex.

17. Age at last birthday 33 (Years)

18. Birthplace (city or place)

(State or country)

Jalisco

Mex.

19. Occupation

Nature of industry

Housewife

Number of children of this mother

(a) Born alive and now living 4

(b) Born alive but now dead 5

(c) Stillborn

Age as of time of birth of child herein
included and including this child.

21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was born alive at 6 A. m. on the date above stated

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from
a supplemental report.

Month, day, year

289-110-432

Registrar

Signature

Cyril M. Larson M.D.

Physician

(Physician or midwife).

Address

Miami, Arizona

Filed

Jan 20, 1928

W. E. Long

Registrar